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| | Petition to Extend Time; and | | | | | |
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| Ĭ | Application Number | ent and Trademark Office, U.S. DEPARTMENT OF COMMERC tion of information unless it displays a valid OMB control numb 09/691,650 | | | | |
| TRANSMITTAL FORM | Filing Date | October 17, 2000 | | | | |
| | First Named Inventor | Mike Krivoruchko 3738 William Matthews | | | | |
| (to be used for all correspondence after initial : | filing) Art Unit | | | | | |
| and the control of th | Examiner Name | | | | | |
| Total Number of Pages in This Submission | Attorney Docket Number | P840 US | | | | |
| | ENCLOSURES (Check all th | nat apply) | | | | |
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| under 37 CFR 1.52 or 1.53 | | | | | | |
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| SIGNATI | URE OF APPLICANT, ATTORN | EY, OR AGENT | | | | |
| or | | | | | | |
| ndividual name Janis J. Biksa; Medtronie Vascular, Inc. | | | | | | |
| anno | alle Jamis Dr | | | | | |
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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. FEE TRANSMITTAL Complete if Known Application Number 09/691,650 for FY 2004 Filing Date October 17, 2000 Effective 10/01/2003, Patent fees are subject to annual revision. First Named Inventor Mike Krivornehko **Examiner Name** William Matthews Applicant claims small entity status. See 37 CFR 1.27 Art Unit 3738 TOTAL AMOUNT OF PAYMENT (\$) 880.00 P840 US Attorney Docket No. METHOD OF PAYMENT (check all that apply) FEE CALCULATION (continued) Check Credit card Other None 3. ADDITIONAL FEES X Deposit Account: Large Entity Small Entity Fee Code Fee Code Fee Description (\$) Account 01-2525 (\$) Fee Paid Number 1051 130 2051 65 Surcharge - late filing fee or oath Deposit Medtronic AVE, Inc. Account 1052 50 2052 25 Surcharge - tale provisional filing fee or Name cover sheet p Director is authorized to: (check <u>all that apply)</u> 1053 130 1053 130 Non-English specification Charge fee(s) indicated below X Credit any overpayments 1812 2,520 1812 2,520 For filing a request for ex parte reexamination Charge any additional fee(s) or any underpayment of fee(s) 920* 1804 1804 Requesting publication of SIR prior to Examiner action Chargo feo(s) indicated below, except for the filing fee 1805 1,840 1805 1,840 Requesting publication of SIR after Examiner action to the above-identified deposit account. FEE CALCULATION 1251 110 2251 55 Extension for reply within first month 110.001. BASIC FILING FEE 1252 420 210 Extension for reply within second month 2252 Large Entity Small Entity 1253 950 2253 475 Extension for reply within third month Fee Fee Code (\$) Fee Fee Fee Description
Code (\$) Fee Paid 1254 1,480 2254 740 Extension for reply within fourth month 1001 770 2001 385 Utility filing fee 1255 2.010 2255 1,005 Extension for reply within fifth month 1002 340 2002 170 Design filing fee 1401 330 2401 165 Notice of Appeal 1003 530 2003 265 Plant filing fee 1402 330 2402 165 Filing brief in support of an appeal 1004 770 2004 385 Reissue filing fee 1403 290 2403 145 Request for oral hearing 1005 160 2005 80 Provisional filing fee 1,510 Petition to institute a public use proceeding 1451 1.510 1451 SUBTOTAL (1) (\$) 1452 110 2452 55 Petition to revive - unavoldable 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE 1453 1.330 2453 665 Petition to revive - unintentional 1501 1,330 665 Utility issue fee (or reissue) 2501 Fee from Extra Claims below Fee Pald 1502 480 Total Claims 2502 240 Design issue fee -201 1503 Independent 640 2503 320 Plant issue fee Multiple Dependent 1460 130 1460 130 Petitions to the Commissioner 1807 50 1807 50 Processing fee under 37 CFR 1.17(q) Large Entity (Small Entity 1806 180 1806 180 Submission of Information Disclosure Stmt Fee Fee Code (\$) Fee Description Code (\$) 40 Recording each patent assignment per property (times number of properties) 8021 40 8021 1202 18 2202 Claims In excess of 20 385 Fliling a submission after final rejection (37 CFR 1.129(a)) 1809 770 2809 1201 86 2201 43 Independent claims in excess of 3 1203 290 2203 145 Multiple dependent claim, if not paid 1810 770 2810 385 For each additional invention to be ** Reissue Independent claims 1204 86 2204 examined (37 CFR 1.129(b)) over original patent 1801 770 2801 385 Request for Continued Examination (RCE) 770.00 1205 18 ** Reissue claims in excess of 20 2205 1802 900 Request for expedited examination 900 1802 and over original patent of a design application Other fee (specify) SUBTOTAL (2) (\$) *Reduced by Basic Filing Fee Paid "or number previously paid, if greater, For Reissues, see above SUBTOTAL (3) (\$) 880.00 SUBMITTED BY (Complete (if applicable) Name (Printrype) Janis J. Biksa Registration No. 33,648 Telephone 707-566-1888 (Attorney/Agent) Signature aus

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